

EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 11/10/2025

ACOND		EAIDER	NCE OF PRO	JPEKIT INS	UKANCE			11/10/2025
THIS EVIDENCE OF PF ADDITIONAL INTERES COVERAGE AFFORDE ISSUING INSURER(S),	T NAMED BE D BY THE PO	ELOW. THIS EVID DLICIES BELOW	DENCE DOES NOT AF . THIS EVIDENCE OF	FIRMATIVELY OR NEG INSURANCE DOES NO	ATIVELY AMEND, E OT CONSTITUTE A (XTEND	OR ALTER T	HE
AGENCY	PHONE (A/C, No, E	(864) 383-510)5	COMPANY				
Brown & Brown Insurance S		Ext): (55.7) 555 515						
3700 Forest Drive, Suite 30	•			SafePort Insurance C	ompany			
3700 Tolest Drive, Suite 30	O			Saler of thisulance C	ompany			
Columbia			SC 29204					
FAX (A/C, No):	E-MAIL ADDRESS:	madison.gesik@bl	brown.com					
CODE: E30486N	TADDICEOU.	SUB CODE: E304	186N					
AGENCY CUSTOMER ID #: 00711626		1002 0022						
INSURED				LOAN NUMBER		POI	LICY NUMBER	
Underwood Acquisitions, LL	C					sc	CC49070802	
DBA: Kilwins Shelter Cove	.0			EFFECTIVE DATE	EXPIRATION D		T	
	10 B			09/22/2025	09/22/202			JED UNTIL
28 Shelter Cove Ln, Suite 1	12-D		00.0000				IERWINA	TED IF CHECKED
Hilton Head Island			SC 29928	THIS REPLACES PRIOR E	VIDENCE DATED:			
PROPERTY INFORMATION	ON							
LOCATION/DESCRIPTION								
28 Shelter Cove Ln				Suite 112-B				
Hilton Head Island								SC 29928
Loc# 00001/Bldg# 00001								
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.								
COVERAGE INFORMATI	ON	PERILS INSI		BROAD X SPE	CIAL			1
Derechal Preparty Chariel	form	COVERAG	E / PERILS / FORMS		——————————————————————————————————————		OF INSURANCE	DEDUCTIBLE
Personal Property, Special to					1	\$441,000		\$1,000
Personal Property, Wind/Ha								5%
Business Personal Property	, Hurricane De	ductible						5%
BI w/ Extra Expense, Busine	ess Income wit	h Extra Expense				\$500,000		
BI w/ Extra Expense, Hurric	ane							72 Hours
Backup - Sewers and Drain	s, Sewer or Dr	ain Backup				\$50,000		
Spoilage, Spoilage of Perisl	nable Stock				\$	\$50,000		
Automatic Increase (Buildin	g Limit) - 8%				İ			
REMARKS (Including Sp	ecial Conditi	ons)			•			•
Kilwins Chocolate Franchise	e, Inc. and Kilw	ins Quality Confec	tions Inc.					
		-						
CANCELLATION								
CANCELLATION SHOULD ANY OF THE	ABOVE DEC	CDIDED DOLLO	EQ DE CANCELLES S	EEODE THE EVOID ATH	ON DATE THERESE	NOTIC	EWILDE	
SHOULD ANY OF THE DELIVERED IN ACCOR				EFURE THE EXPIRATION	JN DATE THEKEUP	, NOTIC	E WILL BE	
ADDITIONAL INTEREST								
NAME AND ADDRESS				ADDITIONAL INSURED	LENDER'S LOSS	S PAYABLE	L	OSS PAYEE
				MORTGAGEE	Additional into	erest		
				LOAN#	1- 4			
	Acquisitions, L	LC dba						
Kilwins She	Iter Cove			AUTHORIZED REPRESENT	ATIVE			
28 Shelter 0	Cove Ln-Ste 11	2-B						
Hilton Head	Island		SC 29928	1				

COMMENTS/REMARKS							
Kilwins Chocolate Franchise, Inc. and Kilwins Quality Confection	ns Inc.						
OFREMARK C	COPYRIGHT 2000, AMS SERVICES INC.						

			AD	DITIONAL COVE	RAGI	ES		
Ref#	Description Accounts F					Coverage Code ACCTS	Form No.	Edition Date
Limit 1		Limit 2	Limit 3	Deductible Amount	Deduc	ctible Type	Premium	
Ref#	Description	n pendent props				Coverage Code BIDP	Form No.	Edition Date
_imit 1 5,000		Limit 2	Limit 3	Deductible Amount	Deduc	ctible Type	Premium	
Ref#	Description BI Extende	n ed Period of Inde	emnity			Coverage Code BIEPI	Form No.	Edition Date
Limit 1		Limit 2	Limit 3	Deductible Amount	Deduc	tible Type Premium		
Ref#	Description Business In	n ncome All Ordin	ary Payroll			Coverage Code BIAOP	Form No.	Edition Date
Limit 1		Limit 2	Limit 3	Deductible Amount	Deduc	etible Type Premium		
Ref#	Description Debris rem					Coverage Code DEBRL	Form No.	Edition Date
Limit 1 25,000		Limit 2	Limit 3	Deductible Amount	Deduc	ctible Type	Premium	
Ref#	Description Forgery Alt					Coverage Code FORGA	Form No.	Edition Date
Limit 1 2,500		Limit 2	Limit 3	Deductible Amount	Deduc	ctible Type	Premium	
Ref#	Description Business Income EDP				Coverage Code BIEDP	Form No. Edition Date		
Limit 1 10,000		Limit 2	Limit 3	Deductible Amount	Deduc	ctible Type Premium		
Ref#	Description Equipment	n Breakdown				Coverage Code EQPBK	Form No.	Edition Date
Limit 1		Limit 2	Limit 3	Deductible Amount 10	Deduc	ctible Type	Premium \$85.00	
Ref#	Description RESTA	n				Coverage Code RESTA	Form No.	Edition Date
imit 1		Limit 2	Limit 3	Deductible Amount	Deduc	ctible Type	Premium \$250.00	
Ref#	Description Spoilage of	n f Perishable Sto	ck			Coverage Code SPOIL	Form No.	Edition Date
Limit 1		Limit 2 Limit 3 Deductible Amount Deductible Type		ctible Type	Premium \$569.00			
Ref#	Description Terrorism (n Coverage (Certif	ied Acts)			Coverage Code TRIA	Form No.	Edition Date
Limit 1		Limit 2	Limit 3	Deductible Amount	Deduc	ctible Type	Premium \$5.0	0
DFADTI	_CV						Copyright 2001,	AMS Services, Inc

ADDITIONAL COVERAGES									
Ref#	Description Valuable Papers			Coverage Code PAPER		Form No.	Edition Date		
Limit 1 10,000		Limit 2	Limit 3	Deductible Amount	Deduc	ctible Type	Premium		
Ref#	Description Sewer or D	n Orain Backup				Coverage Code SDB	Form No.	Edition Date	
Limit 1		Limit 2	Limit 3	Deductible Amount	Deduc	ctible Type	Premium \$462.0	0	
Ref#	Description	n				Coverage Code	Form No.	Edition Date	
Limit 1		Limit 2	Limit 3	Deductible Amount	Deduc	ctible Type	Premium		
Ref#	Description	n				Coverage Code	Form No.	Edition Date	
Limit 1		Limit 2	Limit 3	Deductible Amount	Deductible Type		Premium		
Ref#	Description	n				Coverage Code	Form No.	Edition Date	
Limit 1		Limit 2	Limit 3	Deductible Amount	Deductible Type		Premium		
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Limit 1		Limit 2	Limit 3	Deductible Amount	Deduc	ctible Type	Premium		
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Ref#	Description	n				Coverage Code	Form No.	Edition Date	
Limit 1		Limit 2	Limit 3	Deductible Amount	Deduc	ctible Type	Premium		
Ref#	Description	1				Coverage Code	Form No.	Edition Date	
Limit 1		Limit 2	Limit 3	Deductible Amount	Deduc	ctible Type	Premium		
Ref#	Description	1				Coverage Code	Form No.	Edition Date	
Limit 1		Limit 2	Limit 3	Deductible Amount	Deduc	tible Type	Premium		
Ref#	Description	1				Coverage Code	Form No.	Edition Date	
Limit 1		Limit 2	Limit 3	Deductible Amount	Deduc	tible Type	Premium	<u> </u>	
OFADT	LCV						Copyright 2001, AN	IS Services, Inc.	