

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/11/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	SKIP SORENSEN, AGENT	CONTACT NAME: Brenda Sorensen			
	300 S COUNTY FARM RD, STE D	PHONE (A/C, No, Ext): 630-588-9590 Ext 227	88-9626		
	WHEATON, IL 60187-2438	E-MAIL ADDRESS: Brenda.Sorensen.skn0@StateFarm.com			
ITATE PARM INSURANCE		INSURER(S) AFFORDING COVERA	NAIC#		
		INSURER A : State Farm Fire and Casualty Comp	25143		
INSURED	REPUBLIC SYSTEMS, LLC	INSURER B: State Farm Mutual Automobile Insur	25178		
	100 N HALE STREET	INSURER C:			
	WHEATON, IL 60187-5113	INSURER D:			
		INSURER E:	water and the state of the stat		
		INSURER F:			
COVERAG	ES CERTIFICATE NUMBER:	REVISION	NUMBER:		

THIS IS TO CERTIFY THAT 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 CERTIFICATE 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.

NSR LTR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	The state of the s
Α	GENERAL LIABILITY	Y	Υ			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	EACH OCCURRENCE	\$	1,000,000
	COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000
	CLAIMS-MADE X OCCUR			93-EA-Y696-0	12/29/2017	09/19/2018	MED EXP (Any one person)	\$	10,000
	X PRIMARY & NON-CONTRIB.						PERSONAL & ADV INJURY	\$	1,000,000
	X HIRED & NONOWNED AUTOS						GENERAL AGGREGATE	\$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$	2,000,000
	X POLICY PRO- JECT LOC		_					\$	
В	AUTOMOBILE LIABILITY	Y	YY				COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO ALL OWNED SCHEDULED			P16 9559-F16-13E	06/16/2018	12/16/2018	BODILY INJURY (Per person)	\$	1,000,000
	AUTOS AUTOS							\$	1,000,000
	HIRED AUTOS NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$	100,000
								\$	
A	X UMBRELLA LIAB X OCCUR	Y	Y	93-GY-U086-9	12/29/2017	12/29/2018	EACH OCCURRENCE	\$	1,000,000
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$	2,000,000
	DED X RETENTION\$ 10,000							\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N						WC STATU- OTH- TORY LIMITS ER		
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDED?							E.L. EACH ACCIDENT	\$	
(Mandatory in NH)			ш				E.L. DISEASE - EA EMPLOYEE	\$	
	DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Kilwins Chocolates Franchise, Inc. and Kilwin's Quality Confections Inc. are listed as Additional Insured on Primary and Non-Contributory basis with regards to General Liability, Automobile Liability and Umbrella. Waiver of Subrogation with regards to General Liability, Auto Liability, Umbrella in favor of Kilwins Chocolates Franchise, Inc. and Kilwin's Quality Confections. Inc.

It is agreed that it is the intention of the Company to provide 30 days written notice prior to the cancellation of the policy designated in this certificate. However, the Company assumes no liability for failure to do so.

CER	TIFI	CA	TE	HO	LDI	ER

Kilwins Chocolates Franchise, Inc. Kilwin's Quality Confections Inc. 1050 Bay View Road Petoskey, MI 49770

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

© 1988-2010 AZORD CORPORATION. All rights reserved.

ACORD 25 (2010/05)

The ACORD name and logo are registered marks of ACORD

1001486 132849.7 03-01-2012



ACORD 27 (2016/03)

## **EVIDENCE OF PROPERTY INSURANCE**

DATE (MM/DD/YYYY)

07/11/2018 THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST. AGENCY PHONE (A/C, No, Ext): 630-588-9590 COMPANY NAIC# 25143 State Farm SKIP SORENSEN State Farm Fire and Casualty Company 300 S COUNTY FARM RD STE D WHEATON, IL 60187-2438 FAX (A/C, No): 630-588-9626 E-MAIL ADDRESS: skip.sorensen.L8FT@statefarm.com CODE: SUB CODE: AGENCY CUSTOMER ID #: INSURED LOAN NUMBER POLICY NUMBER REPUBLIC SYSTEMS, LLC 93-EA-Y696-0 100 N HALE STREET **EFFECTIVE DATE** EXPIRATION DATE CONTINUED UNTIL WHEATON, IL 60187-5113 12/29/2017 09/19/2018 TERMINATED IF CHECKED THIS REPLACES PRIOR EVIDENCE DATED: PROPERTY INFORMATION LOCATION/DESCRIPTION 100 N HALE ST, WHEATON, IL 60187 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 INFORMATION BASIC PERILS INSURED BROAD SPECIAL COVERAGE / PERILS / FORMS AMOUNT OF INSURANCE DEDUCTIBLE **Business Personal Property** \$205,000 **Building Betterments & Improvements** \$185,000 Newly Acquired Business Personal Property \$100,000 Loss Of Income & Extra Expense Actual Loss Sustnd 12 Months Dependent Property - Loss of Income \$5,000 Utility Interruption - Loss of Income \$10,000 Glass Expenses \$10,000 Back-Up of Sewer or Drain \$15,000 Spoilage -- On Premises / Off Premises \$15,000 / \$5,000 Food Contamination - Per Occurrence \$10,000 REMARKS (Including Special Conditions) It is agreed that it is the intention of the Company to provide 30 days written notice prior to the cancellation of the policy designated in this certificate. However, the Company assumes no liability for failure to do so. CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. ADDITIONAL INTEREST NAME AND ADDRESS ADDITIONAL INSURED LENDER'S LOSS PAYABLE LOSS PAYEE MORTGAGEE KILWINS CHOCOLATES FRANCHISE, INC. LOAN # KILWIN'S QUALITY CONFECTIONS INC. PETOSKEY, MI 49770 AUTHORIZED REPRESENTATIVE