

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/16/2018

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 Catherine A. McCready **BKC Insurance Services** PHONE (A/C, No, Ext): 231-627-4381 FAX (A/C, No): 231-627-5171 P.O. Box 326, 220 Water Street E-MAIL ADDRESS: cmccready@bkcinsurance.com Cheboygan, MI 49721-0326 Catherine A. McCready NAIC# INSURER(S) AFFORDING COVERAGE INSURER A : Cincinnati Insurance Company 10677 INSURED Dar's Hallmark, Inc. INSURER B: Plaza 27, 1006 S. Main St. INSURER C: Cheboygan, MI 49721 INSURER D INSURER E : INSURER F: **REVISION NUMBER: 1 COVERAGES CERTIFICATE 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. ADDLISUBR POLICY EFF POLICY EXP
(MM/DD/YYYY) (MM/DD/YYYY) LIMITS TYPE OF INSURANCE POLICY NUMBER INSD WVD 1,000,000 Α COMMERCIAL GENERAL LIABILITY Х EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) CLAIMS-MADE | X | OCCUR X ECP0388064 07/15/2018 07/15/2019 1,000,000 Χ 10,000 MED EXP (Any one person) 1,000,000 PERSONAL & ADV INJURY \$ 2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE 2,000,000 PRODUCTS - COMP/OP AGG \$ POLICY \$ OTHER: COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILE LIABILITY 1.000.000 X EBA 038 80 64 07/15/2018 07/15/2019 BODILY INJURY (Per person) \$ X ANY AUTO ALL OWNED AUTOS SCHEDULED BODILY INJURY (Per accident) AUTOS NON-OWNED PROPERTY DAMAGE (Per accident) Х HIRED AUTOS AUTOS 1.000.000 UMBRELLA LIAB EACH OCCURRENCE X Х OCCUR 1,000,000 07/15/2018 07/15/2019 EXCESS LIAB ECP0388064 Α Х AGGREGATE \$ CLAIMS-MADE n X RETENTION\$ DED PER STATUTE WORKERS COMPENSATION AND EMPLOYERS' LIABILITY E.L. EACH ACCIDENT ANY PROPRIETOR/PARTNER/EXECUTIVE N/A OFFICER/MEMBER EXCLUDED? E.L. DISEASE - EA EMPLOYEE \$ (Mandatory in NH) if yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) **CERTIFICATE HOLDER** CANCELLATION KILWI-2 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN Kilwins ChocolateFranshise,Inc ACCORDANCE WITH THE POLICY PROVISIONS. & Kilwin's Quality Confections 1050 Bay View Rd. AUTHORIZED REPRESENTATIVE Petoskey, MI 49770 Catherine A. McCready

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INSURED'S NAME Dar's Hallmark, Inc.

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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, Automobile Liability, Umbrella in favor of Kilwin's Chocolates Franchise, Inc. and Kilwin's Quality Confections, Inc. Umbrella coverage is follow form. Thirty (30) day notice of cancellation or non-renewal.