



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/24/2025

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 have **ADDITIONAL INSURED** provisions or 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 Ironwood, a Marsh & McLennan Agency, LLC Co 4401 Northside Parkway NW Suite 800 Atlanta GA 30327	CONTACT NAME: Madeline Stowe PHONE (A/C, No, Ext): (770) 314-6580 E-MAIL ADDRESS: madeline.stowe@marshmma.com FAX (A/C, No): (404) 503-9101												
INSURED Backyard Products, LLC Backyard Storage Solutions, LLC 317 S. Main Street, 6th Floor Ann Arbor MI 48104	INSURER(S) AFFORDING COVERAGE <table><tr><td>INSURER A: Axis Surplus Insurance Co.</td><td>NAIC # 26620</td></tr><tr><td>INSURER B: Bridgeway Insurance Co. / Munich Re</td><td>12489</td></tr><tr><td>INSURER C: Steadfast Insurance Co. / Zurich</td><td>26387</td></tr><tr><td>INSURER D: Scottsdale Insurance Company</td><td>41297</td></tr><tr><td>INSURER E: National Union Fire Ins. Co. of Pittsburgh, PA</td><td>19445</td></tr><tr><td>INSURER F: Commerce and Industry Ins. Co.</td><td>19410</td></tr></table>	INSURER A: Axis Surplus Insurance Co.	NAIC # 26620	INSURER B: Bridgeway Insurance Co. / Munich Re	12489	INSURER C: Steadfast Insurance Co. / Zurich	26387	INSURER D: Scottsdale Insurance Company	41297	INSURER E: National Union Fire Ins. Co. of Pittsburgh, PA	19445	INSURER F: Commerce and Industry Ins. Co.	19410
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COVERAGES**CERTIFICATE NUMBER:** 11.4.24-25 / 6.30.25-26**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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR Deductible: \$25k Per Occ. GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			P00100001337108	11/04/2024	11/04/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
E	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			CA4489736	06/30/2025	06/30/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B-D	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			See Below	11/04/2024	11/04/2025	EACH OCCURRENCE \$ 20,000,000 AGGREGATE \$ 20,000,000 \$
F	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N	N/A	97087381 / 97087382	06/30/2025	06/30/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

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

Named Insureds include: Backyard Real Estate, LLC, Backyard Storage Solutions, LLC dba Heartland Industries, Backyard Storage Solutions, LLC dba Handy Home Products, Backyard Services, LLC, Backyard Play Systems, LLC dba Heartland Playsets, Backyard Disc Company, Backyard Kids, LLC, Backyard Products Canada Company, Backyard Services Canada, LLC, Backyard Swing-N-Slide Play Systems, LLC, Source Capital Backyard, LLC, Studio Shed Acquisition, LLC, Studio Shed, LLC, Tortuga Outdoor, Backyard Kids, LLC dba Kidkraft, Backyard Kids, LLC dba Solowave

\$20M Excess Liability Program Structure:

CERTIFICATE HOLDER**CANCELLATION**

FOR INFORMATIONAL PURPOSES

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

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AGENCY CUSTOMER ID: _____

LOC #: _____

ADDITIONAL REMARKS SCHEDULE

Page _____ of _____

AGENCY Ironwood, a Marsh & McLennan Agency, LLC Co		NAMED INSURED Backyard Products, LLC	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** 25 **FORM TITLE:** Certificate of Liability Insurance: Remarks

\$5M Primary Excess
Carrier: Bridgeway Insurance Company
Policy #8EA7XL00211203
Effective Dates: 11/4/24 - 11/4/25

\$7.5M part of \$15M excess of \$5M
Carrier: Steadfast Insurance Company
Policy #AEC055982005
Effective Dates: 11/4/24 - 11/4/25

\$7.5M part of \$15M excess of \$5M
Carrier: Scottsdale Insurance Company
Policy #XLS2005608
Effective Dates: 11/4/24 - 11/4/25