ATTACHING TO AND FORMING PART OF: ARS-03-0028022

ISSUED TO: Stralka Tomas

It is hereby declared and agreed that with effect from the Effective Date shown on the Declaration Page attached to the Evidence of Insurance, and continuing for the below mentioned time period, beginning on the Effective Date, any and all charges, expenses or claims related directly or indirectly to the following shall be excluded from this insurance, unless such charges, expenses or claims are directly attributable to and resulting from a covered accident:

Rider Condition	Time Period of Rider
Back/Lower Back Syndrome or Pain, any	
injury to, disease or back disorder, including	
but not limited to, vertebrae, intervertebral,	48 months
discs, surrounding ligaments and muscles,	46 months
and any treatment or operation for or	
complications thereof.	

All other terms, clauses, conditions, provisions, restrictions and exclusions remain unchanged.

(NAME OF MEMBER)	
X	
(SIGNATURE OF MEMBER, GUARDIAN OR PROXY)	DATE (Mo./Day/Yr.)

AZIMUTH RISK SOLUTIONS, LLC.



ATTACHING TO AND FORMING PART OF: ARS-03-0028022

ISSUED TO: Stralka Tomas

It is hereby declared and agreed that with effect from the Effective Date shown on the Declaration Page attached to the Evidence of Insurance, and continuing for the below mentioned time period, beginning on the Effective Date, any and all charges, expenses or claims related directly or indirectly to the following shall be excluded from this insurance, unless such charges, expenses or claims are directly attributable to and resulting from a covered accident:

Rider Condition	Time Period of Rider
Knee, any disorder of the left knee, and any	
operation or treatment for or complications	60 months
thereof.	

All other terms, clauses, conditions, provisions, restrictions and exclusions remain unchanged.

(NAME OF MEMBER)	
X	
(SIGNATURE OF MEMBER, GUARDIAN OR PROXY)	DATE (Mo./Dav/Yr.)

AZIMUTH RISK SOLUTIONS, LLC.



ATTACHING TO AND FORMING PART OF: ARS-03-0028022

ISSUED TO: Stralka Tomas

It is hereby declared and agreed that with effect from the Effective Date shown on the Declaration Page attached to the Evidence of Insurance, and continuing for the below mentioned time period, beginning on the Effective Date, any and all charges, expenses or claims related directly or indirectly to the following shall be excluded from this insurance, unless such charges, expenses or claims are directly attributable to and resulting from a covered accident:

Rider Condition	Time Period of Rider
Cholesterol, Atherosclerosis, any treatment	
of, operation, diagnostic procedure or any other conditions related to elevated cholesterol, chest pain, heart attack, stroke, and plaque deposits, and any complications thereof.	60 months

All other terms, clauses, conditions, provisions, restrictions and exclusions remain unchanged.

(NAME OF MEMBER)	
X	
(SIGNATURE OF MEMBER, GUARDIAN OR PROXY)	DATE (Mo./Day/Yr.)

AZIMUTH RISK SOLUTIONS, LLC.

Χ	
Carlos M. Robinson	
President	

ATTACHING TO AND FORMING PART OF: ARS-03-0028022

ISSUED TO: Stralka Maura

It is hereby declared and agreed that with effect from the Effective Date shown on the Declaration Page attached to the Evidence of Insurance, and continuing for the below mentioned time period, beginning on the Effective Date, any and all charges, expenses or claims related directly or indirectly to the following shall be excluded from this insurance, unless such charges, expenses or claims are directly attributable to and resulting from a covered accident:

Rider Condition	Time Period of Rider
Knee (s), any disorder of the knee (s), and	
any operation or treatment for or	60 months
complications thereof.	

All other terms, clauses, conditions, provisions, restrictions and exclusions remain unchanged.

(NAME OF MEMBER)	
(NAME OF MEMBER)	
x	
(SIGNATURE OF MEMBER, GUARDIAN OR PROXY)	DATE (Mo./Day/Yr.)

AZIMUTH RISK SOLUTIONS, LLC.

Carlos M. Robinson
President