Rider No. 1

ATTACHING TO AND FORMING PART OF: ARS-03-0036628

ISSUED TO: Patenaude Denis

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	36 months	
cholesterol, chest pain, heart attack, stroke, and plaque deposits, and any 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.

Χ	
Carlos M. Robinson	
President	

Rider No. 1

ATTACHING TO AND FORMING PART OF: ARS-03-0036628

ISSUED TO: Brunelli Maria Teresa

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 Co	ondition			Time Period of Rider
Migraine, complication	O	treatment	for	or	36 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.



Rider No. 2

ATTACHING TO AND FORMING PART OF: ARS-03-0036628

ISSUED TO: Brunelli Maria Teresa

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	
Depression, any condition, disease, disorder, treatment of, operation, diagnostic procedure or any other conditions related to		
depression, or mental nervous disorder and any 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.

Χ	
Carlos M. Robinson	
President	