This Declaration Page is attached to and forms part of the Evidence of Insurance provisions: SLC-3 (USA) NMA2868 (24/08/00)

| | Previous No. NONE | Identification No. 691802049900 |
|------|---|---|
| I. | Name and address Of the Master Policyholder: | The Beacon/Axis Series Group Insurance Trust C/O Lutea (Anguilla) Limited P.O. Box 1533, The Valley, TV1 13P British West Indies |
| | Name of Members: | Tanmay Shukla |
| | Members Address: | 20363 royal ave hayward CA United States 94541 |
| | Mail Forwarding Address of Members: | 20363 ROYAL AVE HAYWARD CA United States 94541-4777 |
| II. | Effective date of Coverage: | 09/23/2020 to 09/21/2021 (Coverage and Benefits will terminate at 11:59 PM, EST) |
| III. | Insurance is effective with certain | UNDERWRITERS AT LLOYD'S, LONDON |
| | Percentage | 100% |
| IV. | Amount: | As set forth in Section 21, Schedule of Benefits and Limits |
| | Coverage: | THE BEACON SERIES TRAVEL MEDICAL PLAN |
| | Deductible: | \$250 |
| | Maximum Limit: | \$ 25,000.00 |
| | Ultimate Sports Rider: | No |
| | Premium: | \$ 374.92 |
| VI. | Service of Suit may be made upon: | Drinker, Biddle & Reath LLP 1177 Avenue of Americas, Floor 41 New York, New York, 10036-2714 |
| I. | Agent / Agent(s) of Record: | INSUBUY, Inc. |

Dated:

09/23/2020

AZIMUTH RISK SOLUTIONS

Carlo M. Rohinon

BY: Correspondent