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. **691802049003**

I. Name and address The Beacon/Axis Series Group Insurance Trust

Of the Master Policyholder: C/O Lutea (Anguilla) Limited

P.O. Box 1533, The Valley, TV1 13P

British West Indies

Name of Members: RODRIGUES DE ABREU V VALENTINA

Members Address: AVE. VENEZUELA CALLE 32 URBL. LA PEDREA

ACARIGUA Portuguesa Venezuela 00000

Mail Forwarding Address of Members: 8245nw 33rd terrace

MIAMI Florida United States 33122

II. Effective date of Coverage: 08/14/2020 to 08/12/2021

(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 STUDENT TRAVEL MEDICAL PLAN

Coverage Type: Beacon Student Elite (Member Only)

Maximum Limit: \$ 500,000.00

Sports Rider: No

Premium: \$ 902.72

VI. Service of Suit may be made upon: Drinker, Biddle & Reath LLP

1177 Avenue of Americas, Floor 41 New York, New York, 10036-2714

Carlo M. Rohmon

I. Agent / Agent(s) of Record: Elite International E. Gelves (Elite International Consultant)

Dated: AZIMUTH RISK SOLUTIONS

07/20/2020

BY:

Correspondent