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. 691802049398

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: Li Zehuan

Members Address: 2826 N. Elm Ln.

Arlington Heights Illinois United States 60004

Mail Forwarding Address of Members: 2826 N. Elm Ln.

Arlington Heights Illinois United States 60004

II. Effective date of Coverage: 08/26/2020 to 06/01/2021

(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 Choice (Member Only)

Maximum Limit: \$ 200,000.00

Sports Rider: No

Premium: \$ 249.20

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: Robert Williams (Azimuth Risk Solutions)

Dated: AZIMUTH RISK SOLUTIONS

08/25/2020

BY:

Correspondent