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. 691802049165

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: Burke Robert Garrett (691802049165)

Burke Stacy May (691802052035) Burke Paul Garrett (691802052036)

Members Address: Al Rahab 113.9.2

Cairo Egypt 11865

Mail Forwarding Address of Members: 3716 Oak View Ct

Matthews North Carolina United States 28105

II. Effective date of Coverage: January 16, 2021 to January 14, 2022

(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 24, Schedule of Benefits and Limits

Coverage: MERIDIAN ESSENTIAL

Deductible: \$ 2,500.00

Premium: \$ 3,589.00

Conditional Rate Increase: N/A
Smoking Rider Rate Increase: N/A
Ultimate Sports Rider: No

Rate: \$ 3,589.00

Due Dates/Amounts: January 16, 2021 / \$ 3,589.00

V. Special conditions/Forms Attached:

SLC-3 (USA) NMA2868 (24/08/00); DECLARATION PAGE; FORM MSE-01 (PAGES 1-32); EXHIBIT A - APPLICATION; RIDERS- 2

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. Robins

VII. Agent / Agent(s) of Record:

ARS Default

Dated: AZIMUTH RISK SOLUTIONS

01/19/2021

BY:

Correspondent