	Previous No. NONE	Identification No. 691802051245
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:	Tafuri Christopher Marshall (691802051245)
	Members Address:	Bahia Golf & Residences Tao Zen M8 Akumal Tulum Quintana Roo Mexico 77776
	Mail Forwarding Address of Members:	11435 SW Courtney Drive Lake Suzy Florida United States 34269
11.	Effective date of Coverage:	December 16, 2020 to December 14, 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 24, Schedule of Benefits and Limits
	Coverage:	MERIDIAN CLEAR
	Deductible:	\$ 2,500.00
	Premium:	\$ 1,589.00
	Conditional Rate Increase:	N/A
	Smoking Rider Rate Increase:	N/A
	Ultimate Sports Rider:	No
	Rate:	\$ 1,668.45
	Florida Surplus Lines Tax:	\$ 78.50
	Florida Surplus Lines Fee:	\$ 0.95
	Due Dates/Amounts:	December 16, 2020 / \$ 1,668.45

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VI.	Service of Suit may be made upon:	Drinker, Biddle & Reath LLP 1177 Avenue of Americas, Floor 41 New York, New York, 10036-2714	
VII.	Surplus Lines Agent:	James Allen Hall Surplus Lines Agent (D086040) 10 W 65 th Street Indianapolis, Indiana 46260	

SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.

THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER.

Phone# 317-264-0020

Margaret Lardizabal

Dated:

12/16/2020

AZIMUTH RISK SOLUTIONS

Carlo NI Rohan BY:

Correspondent