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. 691802050078

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: Hart Shawn Charles (691802050078)

Members Address: 100 Lake Frankston

Frankston Texas United States 75763

Mail Forwarding Address of Members: 100 Lake Frankston

Frankston Texas United States 75763

II. Effective date of Coverage: October 9, 2020 to October 7, 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: \$ 1,778.40

Conditional Rate Increase: Shawn by 30%

Smoking Rider Rate Increase: N/A

Ultimate Sports Rider: No

Rate: \$ 2,134.08

Due Dates/Amounts: October 9, 2020 / \$ 355.68; November 8, 2020 - August 7, 2021

/ \$ 177.84

V. Special conditions/Forms Attached:

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

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

VII. Agent / Agent(s) of Record: Craig Robinson

Dated: AZIMUTH RISK SOLUTIONS

10/09/2020

BY:

Correspondent