	Previous No. None	Identification No. 691802051461
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:	Neufeld Erik Samuel (691802051461) Neufeld Chelsie Renee (691802051674) Neufeld Sara Nicole (691802051675) Neufeld Kaitlin Jade (691802051676) Neufeld Annalise Nora (691802051677) Neufeld Silas Craig (691802051678)
	Members Address:	1270 Sandy Dr Florissant Missouri United States 63031
	Mail Forwarding Address of Members:	1270 Sandy Dr Florissant Missouri United States 63031
II.	Effective date of Coverage:	January 1, 2021 to December 30, 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 ESSENTIAL
	Deductible:	\$ 5,000.00
	Premium:	\$ 3,440.20
	Conditional Rate Increase:	Chelsie by 30%
	Smoking Rider Rate Increase:	N/A
	Ultimate Sports Rider:	No
	Rate:	\$ 3,440.20
	Due Dates/Amounts:	January 1, 2021 / \$ 3,440.20

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

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	, <u>,</u>	1177 Avenue of Americas, Floor 41 New York, New York, 10036-2714	
I.	Service of Suit may be made upon:	Drinker, Biddle & Reath LLP	
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VII. Agent / Agent(s) of Record:

Doug Gulleson

Dated:

AZIMUTH RISK SOLUTIONS

12/24/2020

Carlos M. Rohimon BY:

Correspondent