

This Declaration Page is attached to and forms part of the Evidence of Insurance provisions:
SLC-3 (USA) NMA2868 (24/08/00)

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:	BARRIOS PEDRO TOMMY (691802047155) GONZALEZ DE BARRIOS ARACELIS RAMONA (691802047156)
Members Address:	AV. MADRID URB. EL PARQUE RES. PARQUE BARQUISIMETO TORRE B APTO 23B BARQUISIMETO Lara Venezuela 3001
Mail Forwarding Address of Members:	AV. MADRID URB. EL PARQUE RES. PARQUE BARQUISIMETO TORRE B APTO 23B BARQUISIMETO Lara Venezuela 3001
II. Effective date of Coverage:	April 6, 2020 to April 4, 2021 (Coverage and Benefits will terminate at 11:59 PM, EST)
III. Insurance is effective with certain Percentage	UNDERWRITERS AT LLOYD'S, LONDON 100%
IV. Amount: Coverage: Deductible: Premium: Conditional Rate Increase: Smoking Rider Rate Increase: Ultimate Sports Rider: Rate: Due Dates/Amounts:	As set forth in Section 24, Schedule of Benefits and Limits MERIDIAN CLEAR \$ 1,000.00 \$ 5,082.90 PEDRO by 15% ,ARACELIS by 20% N/A No \$ 6,099.48 April 6, 2020 / \$ 1,016.58; May 5, 2020 - February 4, 2021 / \$ 508.29
V. Special conditions/Forms Attached:	SLC-3 (USA) NMA2868 (24/08/00); DECLARATION PAGE; FORM MSE-01 (PAGES 1-32); EXHIBIT A - APPLICATION; RIDERS- 0

