

Previous No. **NONE**

Identification No. **691802049102**

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<b>I. Name and address Of the Master Policyholder:</b>	The Beacon/Axis Series Group Insurance Trust C/O Lutea (Anguilla) Limited P.O. Box 1533, The Valley, TV1 13P British West Indies
<b>Name of Members:</b>	<b>Adkins Benjamin Mark (691802049102)</b>
<b>Members Address:</b>	1333 Chipwood Circle Knoxville Tennessee United States 37932
<b>Mail Forwarding Address of Members:</b>	1333 Chipwood Circle Knoxville Tennessee United States 37932

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<b>II. Effective date of Coverage:</b>	<b>July 27, 2020 to July 25, 2021</b> (Coverage and Benefits will terminate at 11:59 PM, EST)
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<b>III. Insurance is effective with certain Percentage</b>	UNDERWRITERS AT LLOYD'S, LONDON 100%
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<b>IV. Amount:</b>	As set forth in Section 24, Schedule of Benefits and Limits
<b>Coverage:</b>	<b>MERIDIAN ENHANCED</b>
<b>Deductible:</b>	\$ 2,500.00
<b>Premium:</b>	\$ 0.00
<b>Conditional Rate Increase:</b>	N/A
<b>Smoking Rider Rate Increase:</b>	N/A
<b>Ultimate Sports Rider:</b>	No
<b>Rate:</b>	\$ 0.00
<b>Due Dates/Amounts:</b>	July 27, 2020 / \$ 0.00

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<b>V. Special conditions/Forms Attached:</b>	SLC-3 (USA) NMA2868 (24/08/00); DECLARATION PAGE; FORM MSE-01 (PAGES 1-32); EXHIBIT A - APPLICATION; RIDERS- 0
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<b>VI. Service of Suit may be made upon:</b>	Drinker, Biddle & Reath LLP 1177 Avenue of Americas, Floor 41 New York, New York, 10036-2714
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<b>VII. Agent / Agent(s) of Record:</b>	Doug Gulleson
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**Dated:**  
07/28/2020

**AZIMUTH RISK SOLUTIONS**



**BY:**  
**Correspondent**