	Previous No. None	Identification No. 691802052231
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:	Ker Chloe Elle (691802052231)
	Members Address:	12626 Patton St Broomfield Colorado United States 80020
	Mail Forwarding Address of Members:	12626 Patton St Broomfield Colorado United States 80020
II.	Effective date of Coverage:	February 16, 2021 to February 14, 2022 (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:	\$ 2,500.00
	Premium:	\$ 1,809.00
	Conditional Rate Increase:	N/A
	Smoking Rider Rate Increase:	N/A
	Ultimate Sports Rider:	No
	Rate:	\$ 2,026.08
	Due Dates/Amounts:	February 16, 2021 / \$ 506.52; May 15, 2021 - August 14, 2021 - November 14, 2021 / \$ 506.52

## 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

		1177 Avenue of Americas, Floor 41 New York, New York, 10036-2714	
VII	Agent / Agent(s) of Record:	Customer Service	

Dated: 02/17/2021

AZIMUTH RISK SOLUTIONS

Carlos M. Rohinson

BY: Correspondent