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. 691802050367

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: Tomlin Jameson (691802050367)

Rammell Alexandra (691802050375)

Members Address: 938 Chisel Point Drive

Houston Texas United States 77094

Mail Forwarding Address of Members: 4008 Ave D.

Austin Texas United States 78751

II. Effective date of Coverage: November 2, 2020 to October 31, 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 ENHANCED

 Deductible:
 \$ 2,500.00

 Premium:
 \$ 4,299.00

Conditional Rate Increase: N/A
Smoking Rider Rate Increase: N/A
Ultimate Sports Rider: No

Rate: \$4,299.00

Due Dates/Amounts: November 2, 2020 / \$ 4,299.00

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

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: Customer Service

Dated: AZIMUTH RISK SOLUTIONS

10/20/2020

BY:

Correspondent