

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:	Parsons Michael Jeffrey (691802048658) Parsons Amy Marie (691802048659) Parsons Emrie Marie (691802048660) Parsons Eden Elizabeth (691802048661) Parsons Ezekiel Michael (691802048662) Parsons Ezra Theodore Edward (691802048663)
Members Address:	De la esquina sur oeste del parque de los Sauces 100 metros al oeste, casa esquinera. Casa no 1988. San Jose San JosÃ© Costa Rica 00000
Mail Forwarding Address of Members:	2106 S. Lipscomb Amarillo Texas United States 79109
II. Effective date of Coverage:	July 2, 2020 to June 30, 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 ESSENTIAL \$ 1,000.00 \$ 3,372.00 N/A N/A No \$ 3,372.00 July 2, 2020 / \$ 3,372.00

