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. 691802051730

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: Smith Ronald James (691802051730)

Smith Sua Thach (691802051965) Smith Jasmine Thach (691802051966) Smith Jessica Thach (691802051968) Smith Joanna Thach (691802051969)

Members Address: 737 Old Hollow Rd

Winston Salem North Carolina United States 27105

Mail Forwarding Address of Members: P.O. Box 754

Phnom Penh Phnom Penh Cambodia 12000

II. Effective date of Coverage: January 11, 2021 to January 9, 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: \$ 1,000.00 **Premium:** \$ 3,543.00

Conditional Rate Increase:N/ASmoking Rider Rate Increase:N/AUltimate Sports Rider:No

Rate: \$ 3,543.00

Due Dates/Amounts: January 11, 2021 / \$ 3,543.00

V. Special conditions/Forms Attached:

 $SLC-3 \ (USA) \ NMA2868 \ (24/08/00); \ DECLARATION \ PAGE; \ FORM \ MSE-01 \ (PAGES \ 1-32); \ EXHIBIT \ A-APPLICATION; \ RIDERS-8 \ APPLICATION; \ RIDERS-8 \ APPLICATION;$

VI. Service of Suit may be made upon: Drinker, Biddle & Reath LLP

1177 Avenue of Americas, Floor 41 New York, New York, 10036-2714

als M. Rohmon

VII. Agent / Agent(s) of Record: Doug Gulleson

Dated: AZIMUTH RISK SOLUTIONS

01/12/2021

BY:

Correspondent