

Previous No. **NONE**

Identification No. **691802051002**

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- 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:** **Kumata Alyssa Joy (691802051002)**
- Members Address:** 6304 W Poinsettia Dr
Glendale Arizona United States 85304
- Mail Forwarding Address of Members:** 6304 W Poinsettia Dr
Glendale Arizona United States 85304
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- II. Effective date of Coverage:** **November 23, 2020 to November 21, 2021**
(Coverage and Benefits will terminate at 11:59 PM, EST)
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- III. Insurance is effective with certain Percentage** UNDERWRITERS AT LLOYD'S, LONDON
100%
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- IV. Amount:** As set forth in Section 24, Schedule of Benefits and Limits
- Coverage:** **MERIDIAN ESSENTIAL**
- Deductible:** \$ 1,000.00
- Premium:** \$ 1,212.00
- Conditional Rate Increase:** Alyssa by 20%
- Smoking Rider Rate Increase:** N/A
- Ultimate Sports Rider:** No
- Rate:** \$ 1,212.00
- Due Dates/Amounts:** November 23, 2020 / \$ 1,212.00
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- 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
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- VI. Service of Suit may be made upon:** Drinker, Biddle & Reath LLP
1177 Avenue of Americas, Floor 41
New York, New York, 10036-2714
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- VII. Agent / Agent(s) of Record:** Craig Robinson
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Dated:
11/24/2020

AZIMUTH RISK SOLUTIONS



BY:
Correspondent