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. 691802049610

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: Kipkirui Hezron (691802049610)

Members Address: 179 Montrose drive

Montrose Colorado United States 81401

Mail Forwarding Address of Members: 179 Montrose drive

Montrose Colorado United States

II. Effective date of Coverage: September 15, 2020 to September 13, 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 ESSENTIAL

Deductible: \$ 10,000.00

Premium: \$410.00

Conditional Rate Increase:N/A **Smoking Rider Rate Increase:**N/A

Ultimate Sports Rider: No

Rate: \$ 492.00

Due Dates/Amounts: September 15, 2020 / \$ 82.00; October 14, 2020 - July 13, 2021

/ \$ 41.00

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

09/15/2020

BY:

Correspondent