

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:	Llamozas Ana Carolina (691802048650)
Members Address:	Carretera la Union Urbanizacion Vistal Valle Casa #32 Municipio El Hatillo Caracas Miranda Venezuela 1080
Mail Forwarding Address of Members:	122 Riverwalk Circle Plantation Florida United States 33325
II. Effective date of Coverage:	July 1, 2020 to June 29, 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: Florida Surplus Lines Tax & Fee: Due Dates/Amounts:	As set forth in Section 24, Schedule of Benefits and Limits MERIDIAN ESSENTIAL \$ 1,000.00 \$ 1,179.00 N/A N/A No \$ 1,239.72 \$ 60.72 July 1, 2020 / \$ 1,239.72
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

