

Previous No. **NONE**

Identification No. **BG001030**

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<b>I. Name and address Of the Applicant:</b>	The Beacon/Axis Series Group Insurance Trust C/O Lutea (Anguilla) Limited P.O. Box 1533, The Valley, TV1 13P British West Indies
<b>Name of Members:</b>	<b>Anju Joy</b>
<b>Primary Residence Address of Members:</b>	5401 Chimney Rock Rd Apt 481 Houston, Texas United States 77081

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<b>II. Effective date from:</b>	<b>01/01/2021 to 03/31/2021</b> (Coverage and Benefits will terminate at 11:59 PM, EST)
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<b>III. Insurance is effective with certain Percentage</b>	UNDERWRITERS AT LLOYD'S, LONDON  100%
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<b>IV. Amount:</b>	As set forth in Section 24, Schedule of Benefits and Limits
<b>Coverage:</b>	<b>OverseasCare™ Visitors Insurance™ Travel Medical Plan (A BEAON SERIES PRODUCT)</b>
<b>Deductible:</b>	\$ 500.00 per Coverage Period
<b>Maximum Limit:</b>	\$ 60,000.00
<b>Rate:</b>	\$ 0.79 per day per member
<b>Due Dates/Amounts:</b>	03/31/2021 / \$ 70.20

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<b>VI. Service of Suit may be made upon:</b>	Drinker, Biddle & Reath LLP 1177 Avenue of the Americas, Floor 41 New York, New York 10036-2714
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<b>VII. Agent / Agents of record:</b>	Visitors Insurance
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**Dated:**  
**January 01, 2021**

**AZIMUTH RISK SOLUTIONS**

  
**BY:**  
**Correspondent**

A full version of the Evidence of Insurance or Master Policy with a complete list of benefits, conditions, limitations and exclusions are available upon request.