

**LIFE INSURANCE COMPANY OF NORTH AMERICA
(herein called the Company)**

Amendment to be attached to and made a part of the Group Policy
A Contract between the Company and

Bibb County School District
(herein called the Policyholder)

Policy No.: SLH-100005

PLEASE READ

IMPORTANT: The attached amendment to your policy has been made at your request, and will be effective on the date shown within the amendment. Please review this amendment immediately and confirm that it accurately reflects your request and is consistent with your intentions. If amended certificates have been provided, please review these as well. If there are any errors or discrepancies, please notify your account manager or account service representative immediately. If you have not notified your account manager or account service representative of any errors or concerns, continued payment of premium more than 31 days after delivery of this amendment will be deemed acceptance of this amendment.

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Bibb County School District
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This Amendment will be in effect on the Effective Date(s) shown below only for insured Employees in Active Service on that date. If an Employee is not in Active Service on the date his insurance would otherwise become effective, it will be effective on the date he returns to Active Service.

The Company and the Policyholder hereby agree that the Policy is amended as follows:

1. Effective December 1, 2016, the following Annual Enrollment provision is added to the Policy:

ENROLLING FOR INSURANCE

Annual Enrollment Period

During the Annual Enrollment Period, an Employee currently insured may increase coverage without satisfying the Insurability Requirement. An Employee who was eligible for coverage but did not enroll during his or her initial enrollment may become insured by satisfying the Insurability Requirement.

Increases or Decreases in Coverage

An insured Employee may elect to increase, decrease or cancel coverage, at any time, during an Annual Enrollment Period. If an Employee is insured for the maximum benefit amount allowed based on the Employee's Covered Earnings and the Employee receives an increase in Covered Earnings, the Pre-Existing Condition Limitation will not apply to the increased amount if the Employee elects, during the following Annual Enrollment, to increase his or her benefit to the new maximum amount.

2. Effective December 1, 2016, Pre-Existing Condition Limitation is replaced by the following:

PRE-EXISTING CONDITION LIMITATION

The Insurance Company will not pay benefits for any period of Disability caused or contributed to by, or resulting from, a Pre-existing Condition. A "Pre-existing Condition" means any Injury or Sickness for which the Employee incurred expenses, received medical treatment, care or services including diagnostic measures, or took prescribed drugs or medicines within 3 months before his or her most recent effective date of insurance.

The Pre-existing Condition Limitation will apply to any added benefits or increases in benefits. This limitation will not apply to a period of Disability that begins after an Employee is covered for at least 12 months after his or her most recent effective date of insurance, or the effective date of any added or increased benefits. **Pre-Existing Condition Limitation (An insured Employee may elect to increase or decrease coverage during Annual Enrollment. If an Employee is insured for the maximum benefit amount allowed based on the Employee's Covered Earnings and the Employee receives an increase in Covered Earnings, the Pre-Existing Condition Limitation will not apply to the increased amount if the Employee elects, during the following Annual Enrollment, to increase his or her benefit to the new maximum amount.)**

Except for any amount of benefit in excess of a Prior Plan's benefits, it will not apply to an Employee covered under a Prior Plan who satisfied the Pre-existing Condition limitation, if any, under that plan. If an Employee, covered under a Prior Plan, did not fully satisfy the Pre-existing Condition Limitation of that plan, credit will be given for any time he did satisfy. Time will not be credited for any day an Employee is not in Active Service or is not actively at work due to Sickness. This limitation will be extended by the number of days the Employee is not in Active Service or not actively at work due to Sickness.

Except for the above, this Amendment does not change the Policy in any way.

FOR THE COMPANY

A handwritten signature in black ink that reads "Matthew G. Manders". The signature is written in a cursive style with a large initial "M".

Matthew G. Manders, President

Date: February 6, 2017

Amendment No. 01

TL-004780