

SAFETY MANAGEMENT CERTIFICATE

Issued under the provisions of the
INTERNATIONAL CONVENTION FOR THE SAFETY OF LIFE AT SEA; 1974,
as amended

under the authority of the Government of the

**REPUBLIC OF PANAMA**

by DNV GL

Name of Ship	Distinctive Number or Letters	Port of Registry	Gross Tonnage	IMO Number
NYK TRITON	3FUL2	Panama	76614	9356713

Name and address of the Company (see paragraph 1.1.2 of the ISM Code)	Company identification number	Type of Ship *
Columbia Shipmanagement Ltd. Columbia House, 21 Spyrou Kyprianou Avenue, Yermasoyia, 4042 Limassol / CYPRUS	0778064	Other cargo ship

THIS IS TO CERTIFY THAT the Safety Management System of the ship has been audited and that it complies with the requirements of the International Management Code for the Safe Operation of Ships and for Pollution Prevention (ISM Code), following verification that the Document of Compliance for the Company is applicable to this type of ship.

This Safety Management Certificate is valid until **4th May, 2019**, subject to periodical verification and the Document of Compliance remaining valid.

Completion date of the verification on which this certificate is based: **11th March, 2014**

Issued at **Piraeus** the **21st day of March, 2014**

Spyros Lamprinopoulos
Spyros Lamprinopoulos

Argyro Katsampa
Argyro Katsampa

* Insert the type of ship from: Passenger ship, passenger high-speed craft, cargo high-speed craft, bulk carrier, oil tanker, chemical tanker, gas carrier, mobile offshore drilling unit, other cargo ship.

Endorsement for periodical verification and additional verification (if required)

Range for the intermediate verification: **5th May, 2016 to 4th May, 2017**

The intermediate verification is to be completed between the second and the third anniversary date.

THIS IS TO CERTIFY THAT, at the periodical verification in accordance with regulation IX/6.1 of the Convention and paragraph 13.8 of the ISM Code, the Safety Management System was found to comply with the requirements of the ISM Code.

Intermediate verification

Signed:

DNV GL Representative

Place:

Date:

Additional verification

Signed:

DNV GL Representative

Place:

Date:

Additional verification

Signed:

DNV GL Representative

Place:

Date:

Additional verification

Signed:

DNV GL Representative

Place:

Date: