



SHIP8 INC

MOBILE EQUIPMENT

OPERATOR CERTIFICATE

This certificate confirms that

OPERATORS NAME

James Lenoir

OPERATORS SIGNATURE

[Signature]

Has successfully fulfilled all the theoretical and practical training and evaluation requirements listed in federal and regional regulations and is hereby authorized to operate the type(s) of mobile equipment listed on the reverse.

CERTIFICATION DATE

8/26/2024

DATE ISSUED

8/26/2024

DATE EXPIRES

8/26/2027

TRAINER NAME

Jimmy Farmer

TRAINER SIGNATURE

[Signature]

EMPLOYER NAME

SHIP8, INC

AUTHORIZING PERSON

Edward Maxwell

EMPLOYER SIGNATURE

[Signature]

Valid at SHIP8 INC.

MOBILE EQUIPMENT TYPE(S)

OP

TRAINER NAME

Jimmy Farmer

DATE OF ISSUE

8/26/2024

REFER TO THIS OPERATOR'S CERTIFICATION FOLDER FOR COMPLETE DETAILS ON TRAINING & EVALUATION (INCLUDING MORE SPECIFICS ON EQUIPMENT & ATTACHMENTS)

IF YOU BELIEVE YOUR CERTIFICATION IS INCORRECT, SEE SAFETY TEAM