



MOBILE EQUIPMENT OPERATOR CERTIFICATE

Valid at SHIP8 INC.

MOBILE EQUIPMENT TYPE(S)
OP

TRAINER NAME
Jimmy Farmer
DATE OF ISSUE
10/16/2024

This certificate confirms that

OPERATORS NAME
Marcelus Scott

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
10/16/2024

DATE ISSUED
10/16/2024

DATE EXPIRES
10/16/2027

TRAINER NAME
Jimmy Farmer

TRAINER SIGNATURE
[Signature]

EMPLOYER NAME
SHIP8, INC

AUTHORIZING PERSON
Edward Maxwell

EMPLOYER SIGNATURE
[Signature]

IF YOU BELIEVE YOUR CERTIFICATION IS INCORRECT, SEE SAFETY TEAM

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