

THE REPUBLIC OF LIBERIA LIBERIA MARITIME AUTHORITY

INTERNATIONAL SHIP SECURITY CERTIFICATE

Issued under the provisions of the INTERNATIONAL CODE FOR THE SECURITY OF SHIPS AND PORT FACILITIES

(ISPS Code)

under the authority of the Government of

The Republic of Liberia

by the Office of the Deputy Commissioner, Liberia Maritime Authority

Name of ship	IQUIQUE EXPRESS
Distinctive number or letters	5LQD5
Port of registry	MONROVIA, LIBERIA
Type of ship	Other cargo ship
Gross Tonnage	124,012
IMO Number	9938456
Name and address of Company	Anglo-Eastern (Germany) GmbH Ship Management Raboisen 28 20095 Hamburg GERMANY

Company identification Number 5365996

THIS IS TO CERTIFY:

- 1. that the security system and any associated security equipment of the ship has been verified in accordance with section 19.1 of part A of the ISPS code.
- 2. that the verification showed that the security system and any associated security equipment of the ship is in all respects satisfactory and that the ship complies with the applicable requirements of Chapter XI-2 of the Convention and part A of the ISPS code.
- 3. that the ship is provided with an approved ship security plan.

Date of initial/renewal verification on which this certificate is based **September 15, 2024** This Certificate is valid until **September 14, 2029** subject to verifications in accordance with section 19.1.1 of part A of the ISPS Code.

Issued At : Yokohama, Japan

Date of issue : September 15, 2024





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Margaret Ansumana Senior Deputy Commissioner of Maritime Affairs Republic of Liberia

ENDORSEMENT FOR INTERMEDIATE VERIFICATION

THIS IS TO CERTIFY that at an intermediate verification required by section 19.1.1 of part A of the ISPS Code the ship was found to comply with the relevant provision of Chapter XI-2 of the Convention and part A of the ISPS Code.

INTERMEDIATE VERIFICATION	Signed :
(to be completed between the second and third anniversary date)	(Signature of authorized official) Place :
	Date :
ADDITIONAL VERIFICATION	Signed :
	Place :
	Date :
ADDITIONAL VERIFICATION	Signed :
	(Signature of authorized official) Place :
	Date :
ADDITIONAL VERIFICATION	Signed :
	Place :
	Date :