

MANAGEMENT SYSTEM CERTIFICATE

Certificate no.: n1969645-rah DNV ID no.: 131198 Date of issue: 2024-04-23

Particu	lars of	company	1
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Company name:

Company address:

Kongsberg Maritime AS

Kirkegårdsveien 45 3616 Kongsberg NORWAY

Branch offices, if applicable

Name Kongsberg Maritime do Brasil Ltda

Kongsberg Maritime AS

Kongsberg Maritime AS (extended site)

Address Ilha do Caju, 131 Ponta de Areia 24040-005 Niteroi Rio de Janeiro Brazil

Skonnertveien 1 7053 Ranheim Norway

Strandpromenaden 52 3183 Horten Norway

This is to certify:

That the management system of the company has been audited and that it complies with the requirements of:

Standard for Certification DNV-ST-0029 Maritime Training Providers

Areas of Activity/Capacity of Training Provider:

Maritime Training Centre

Maritime Simulator Centre
Offshore Simulator Centre

Maritime Academy

This Certificate is valid until **2027-05-16**, subject to annual verification.

Completion date of audit on which this Certificate is based: 2022-05-11

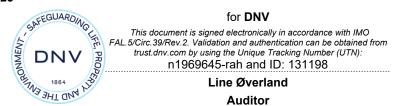
LEGAL DISCLAIMER: Unless otherwise stated in the applicable contract with the holder of this document, or following from mandatory law, the liability of DNV AS, its parent companies and their subsidiaries as well as their officers, directors and employees ("DNV") arising from or in connection with the services rendered for the purpose of the issuance of this document or reliance thereon, whether in contract or in tort (including negligence), shall be limited to direct losses and under any circumstance be limited to 300,000 USD.

See paragraph 1.1.2 of the ISM Code.





Issued at Kongsberg, Norway on 2024-04-23



Endorsement for annual audits

THIS IS TO CERTIFY: that, at an annual audit as required by the Standard, the Management System was found to comply with the relevant requirements of the Standard. First annual audit: Place: Kongsberg, Norway Date: 2023-04-27 SAFEGUARD IB64 IB64 anr Signature: Line Øverland Place: Kongsberg, Norway Second annual audit: Date: 2024-04-23 SAFEGUARD, IN NONMENT Signature: Line Øverland NJ THE EN Third annual audit: Place: Date: Signature: Stamp Fourth annual audit: Place: _____ Date: _____

Signature: Stamp