



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	PROTECTOR ST. RAPHAEL
Distinctive number or letters	5LGC5
Port of registry	MONROVIA, LIBERIA
Type of ship	Bulk carrier
Gross Tonnage	33,044
IMO Number	9583615
Name and address of Company	Holger Navigation Corp. 90 Evrou Street Athens, 11527 GREECE
Company identification Number	6238941

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 *"Feb 12, 2023"*
This Certificate is valid until *"Feb 11, 2028"* subject to verifications in accordance with section 19.1.1 of part A of the ISPS Code.

Issued At : **Canakkale, Turkey**

Date of issue : *"Feb 12, 2023"*



[Signature]
Oguz Bala
**LIBERIAN SECURITY AUDITOR
ON BEHALF OF DEPUTY COMMISSIONER
OF MARITIME AFFAIRS 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 :
(Signature of authorized official)

Place :

Date :

ADDITIONAL VERIFICATION Signed :
(Signature of authorized official)

Place :

Date :

ADDITIONAL VERIFICATION Signed :
(Signature of authorized official)

Place :

Date :