

SAFETY MANAGEMENT CERTIFICATE

Issued under the provisions of the **INTERNATIONAL CONVENTION
FOR THE SAFETY OF LIFE AT SEA, 1974**, as amended
under the authority of the Government of

United States of America

(name of state)

by the **AMERICAN BUREAU OF SHIPPING**

Name of Ship:	CHARLESTON EXPRESS	
Distinctive Number or Letters:	1195531 WDD6126	
Port of Registry:	Charleston, SC	
Type of Ship: ¹	Other Cargo Ship	Container Carrier
Gross Tonnage:	40146	
IMO Number:	9243162	
Name and address of the Company:	MARINE TRANSPORT MANAGEMENT, INC.	

9487 REGENCY SQUARE BLVD

JACKSONVILLE FL 32225 United States

(see paragraph 1.1.2 of the ISM Code)

Company identification number: _____

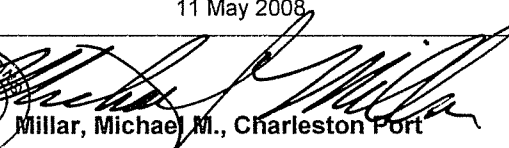
THIS IS TO CERTIFY the Safety Management System of the ship has been audited and that it complies with the requirements of the International Management Code for the Safe Operation of Ships and for Pollution Prevention (ISM Code), following verification that the Document of Compliance for the Company is applicable to this type of ship.

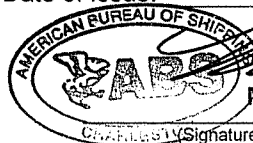
This Safety Management Certificate is valid until 13 December 2012, subject to periodical verification and the Document of Compliance remaining valid.

Completion date of the audit on which this certificate is based: 14 December 2007
(dd/mm/yyyy)

Issued at: Charleston, South Carolina
(place of issue of the document)

Date of Issue: 11 May 2008


Millar, Michael M., Charleston Port
 (Signature of the duly authorized official issuing the certificate)



¹ Insert the type of ship from among the following: Passenger Ship; Passenger High Speed Craft; Cargo High Speed Craft; Bulk Carrier; Oil Tanker; Chemical Tanker; Gas Carrier; Mobile Offshore Drilling Unit; Other Cargo Ship. For "Other Cargo Ship" specify detail type in adjacent field.

ENDORSEMENT FOR PERIODICAL VERIFICATION AND ADDITIONAL VERIFICATION
(if required)

THIS IS TO CERTIFY THAT, at the periodical verification in accordance with regulation IX/6.1 of the Convention and paragraph 13.8 of the ISM Code, the Safety Management System was found to comply with the requirements of the ISM Code.

Intermediate Verification
(to be completed between the second and third anniversary date)

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: _____

Additional Verification*

Signed: _____
(Signature of authorized official)

Place: _____

Date: _____

*If applicable. Reference is made to the relevant provisions of section 3.2 "Initial verification" of the Revised Guidelines on Implementation of the International Safety Management (ISM) Code by Administrations adopted by the Organization by resolution A.913(22).