FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL OMB Number: 3235-0104 OMB Number: Estimated average burden hours per response:

| Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934<br>or Section 30(h) of the Investment Company Act of 1940 |                |       |  |  |  |  |  |                                  |  |  | hours per res   | sponse: | 0.5 |
|--|----------------|-------|--|--|--|--|--|----------------------------------|--|--|---|---------|-----|
| 1. Name and Address of Reporting Person <sup>*</sup><br>RINGLER JAMES M  |                |       |  | 2. Date of Event Requiring Statement<br>(Month/Day/Year)<br>01/17/2017 |  |  | 3. Issuer Name and Ticker or Trading Symbol<br><u>TechnipFMC plc</u> [FTI] |                                  |  |  |   |         |     |
| (Last) (First) (Middle) ONE ST. PAUL'S CHURCHYARD  |                |       |  |  | 4. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)<br>X Director |  | 10% Owner  |                                  | 5. If Amendment, Date of Original Filed (Month/Day/Year)     6. Individual or Joint/Group Filing (Check Applicable Line) |  |   |         |     |
| (Street)<br>LONDON   | DN XO EC4M 8AP |       |  |  | Officer (give title below)   | Officer (give title below)   | Other (specify belo  |                                  | X Form filed by One Reporting Person<br>Form filed by More than One Reporting Person                                     |  |   |         |     |
| (City)   | (State)        | (Zip) |  |  |  |  |  |                                  |  |  |   |         |     |
|  |                |       |  | Table  | I - Non-De   | rivative S   | ecurities Beneficially Owned   |                                  |  |  |   |         |     |
| 1. Title of Security (Instr. 4)  |                |       |  |  | 2. Amount o<br>(Instr. 4)  |  | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)                   |                                  | 4. Nature of Indirect Beneficial Ownership (Instr. 5)  |  |   |         |     |
| No Securities are Beneficially Owned   |                |       |  |  |  |  | 0  | D                                |  |  |   |         |     |
| Table II - Derivative Securities Beneficially Owned           (e.g., puts, calls, warrants, options, convertible securities)     |                |       |  |  |  |  |  |                                  |  |  |   |         |     |
| 1. Title of Derivative Security (Instr. 4) 2. Date Exercisable and Expiration Date (Month/Day/Year)                              |                |       |  |  | ate  | 3. Title and Amount of Securities Underlying Derivative Security 4. Convers<br>(Instr. 4) of Derivativ |  |                                  | ce Form: Di  | rship<br>rect (D) or<br>(I) (Instr. 5) | 6. Nature of Indirect Benefic<br>Ownership (Instr. 5) | cial    |     |
|  |                |       |  | Date<br>Exercisable  | Expiration<br>Date   | Title  |  | Amount or<br>Number of<br>Shares | - Security   |  |   |         |     |
| Explanation of Resp  | onses:         |       |  |  |  |  |  |                                  |  |  |   |         |     |

Explana Remarks:

Lisa P. Wang, Attorney-In-Fact

\*\* Signature of Reporting Person

01/17/2017 Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\*\* If the form is Separate line to calculate on second or second or because of induced of induced of induced.
 \*\* If the form is filed by more than one reporting gerson, see Instruction 5 (b)(v).
 \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
 Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.
 Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

TechnipFMC Limited

## LIMITED POWER OF ATTORNEY (For Executing Forms 3, 4 and 5)

Know all by these presents, that the undersigned hereby constitutes and appoints each of Jay A. Nutt, Charles-Henri Prou and Lisa P. Wang, signing singly, and with 1

1. Execute for and on behalf of the undersigned, in the undersigned's capacity as an officer or director, or both, of TechnipFMC Limited (to be renamed TechnipFMC

2. Do and perform any and all acts for and on behalf of the undersigned that may be necessary or desirable to complete and execute any such Form 3, 4 or 5, comple

3. Take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to, in the best The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary ar This Limited Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4 or 5 with respect to the undersi IN WITNESS WHEREOF, the undersigned has caused this Limited Power of Attorney to be executed as of this 13th day of January 2017.

/s/ James M. Ringler