Form: ANNEX 2

Date of submission		13/06/2012
Section 1: Project Details		
1. Title of the CDM project activity	ESTRE's Paulínia Landfill Gas Project (EPLGP)	
2. Please state reference number if available	0165	
Section 4: Change of contact details (project participants or focal point entities)		
The following entity is an existing project participant/focal point entity in respect of the above CDM project and hereby requests the following changes to its contact details: Project Participant Focal Point		
Name of the entity: European Carbon Fund		
Party (country that authorised participation): France		
Contact details (primary authorized signatory):	Mr.⊠ Ms. □	
Last name: Queru	Telephone:	
First name: Gautier	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr. Ms.	
Last name: Deiber	Telephone:	
First name: Marcelle	Fax:	
Email:	Address:	
Specimen signature:		
Signature(s) of designated focal point for scope (b):	Da	ite:
Name:	Signature:	
Only one primary or alternate signatory per focal point entity is required.		

The following entity is an existing project participant/focal point entity in respect of the above CDM project and hereby requests the following changes to its contact details:		
Project Participant	□ Focal Point	
Name of the entity: European Carbon Fund		
Party (country that authorised participation): Switzerland		
Contact details (primary authorized signatory):	Mr.⊠ Ms.□	
Last name: Queru	Telephone:	
First name: Gautier	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr. Ms. Ms.	
Last name: Deiber	Telephone:	
First name: Marcelle	Fax:	
Email:	Address:	
Specimen signature:		
Signature(s) of designated focal point for scope (b):	Date:	
Name:	Signature:	
Only one primary or alternate signatory per focal point entity is required.		

The following entity is an existing project participant/focal point entity in respect of the above CDM project and hereby requests the following changes to its contact details:		
Project Participant	Focal Point	
Name of the entity: European Carbon Fund		
Party (country that authorised participation): United Kingdom of Great Britain and Northern Ireland		
Contact details (primary authorized signatory):	Mr.⊠ Ms.□	
Last name: Queru	Telephone:	
First name: Gautier	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr. Ms. Ms.	
Last name: Deiber	Telephone:	
First name: Marcelle	Fax:	
Email:	Address:	
Specimen signature:		
Signature(s) of designated focal point for scope (b):	Date:	
Name:	Signature:	
Only one primary or alternate signatory per focal point entity is required.		