CDM-MOC-FORM: ANNEX 2

This annex is to be used by the focal point(s) for scope of authority (b) or by the submitting project participant when applicable, to request changes to project participant status and contact details of focal points following project/programme registration.

Date of submission:	16/02/	2023	
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS			
Title of the project / programme of activities:		Wind Power Plants Eurus II and Renascença V CDM Project	
Project / programme of activities reference number:		10139	
SECTION 2: ADDITION/CHANGE OF LEGAL NAME OF A PROJECT PARTICIPANT ENTITY/IES			
Name of entity: ACT Financial Solutions B.V			
Address: STRAWINSKYLAAN 3127 1077 ZX 1077 AMSTERDAM Netherlands			
Party (country authorizing participation): United Kingdom of Great Britain and Northern Ireland			
End-date of participation:	☑ N/A (participation i	is not limited in time) dd/mm/yyyy	
Contact details (primary authorized signatory):		Mr. ☑ Ms. □	
Last name: Sijbrandij		Telephone 1:	
First name: Robbert		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
Contact details (alternate authorized signatory):		Mr. ☑ Ms. ☐	
Last name: Schaapveld		Telephone 1:	
First name: Jeroen		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
Signature(s) of the focal point for Name of authorized signatory:	scope of authority (b)	Signature	Date: dd/mm/yyyy
(Add lines for signatories as necessary	ary. Only one signatory p	er focal point is required.)	