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:		06/11/2017	
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS			
Title of the project / programme of activities:		BRASCARBON Methane Recovery Project BCA-BRA-04A.	
Project / programme of activities reference number:		5484	
SECTION 2: ADDITION/CHANGE OF LEGAL NAME OF A PROJECT PARTICIPANT ENTITY/IES			
Name of entity: SPCarbono Créditos de Carbono S.A.			
Address: Rua Amália de Noronha 151, CJ 502, 05410-010 São Paulo, SP, Brazil 05410010 São Paulo Brazil			
Party (country authorizing participation): Brazil			
End-date of participation:	■ N/A (participation	is not limited in time) \(\square \text{dd/mm/yyy} \)	у
Contact details (primary authorized signatory):		Mr.⊠ Ms.□	
Last name: Pacifico da Silva		Telephone 1:	
First name: Mário		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
Contact details (alternate authorized signatory):		Mr.⊠ Ms.□	
Last name: Garcia		Telephone 1:	
First name: David		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 n	per focal point is required)	