

GreenHaven Continuous Commodity Index Fund
Form 25
November 18, 2008

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

**FORM 25
NOTIFICATION OF REMOVAL FROM LISTING AND/OR
REGISTRATION UNDER SECTION 12(b) OF THE
SECURITIES EXCHANGE ACT OF 1934.**

Commission File Number 333-138424

GreenHaven Continuous Commodity Index Fund; NYSE Alternext U.S. LLC

(Exact name of Issuer as specified in its charter, and name of Exchange where security is listed and/or registered)

c/o GreenHaven Commodity Services, LLC, 3340 Peachtree Road, Suite 1910

Atlanta, Georgia 30326, 404-239-7941

(Address, including zip code, and telephone number, including area code, of Issuer's principal executive offices)

GreenHaven Continuous Commodity Index Fund Units of Beneficial Interest

(Description of class of securities)

Please place an X in the box to designate the rule provision relied upon to strike the class of securities from listing and registration:

- 17CFR240.12d2-2(a)(1)
- 17CFR240.12d2-2(a)(2)
- 17CFR240.12d2-2(a)(3)
- 17CFR240.12d2-2(a)(4)
- Pursuant to 17 CFR 240.12d2-2(b), the Exchange has complied with its rules to strike the class of securities from listing and/or withdraw registration on the Exchange.¹
- Pursuant to 17 CFR 240.12d2-2(c), the Issuer has complied with the rules of the Exchange and the requirements of 17 CFR 240.12d2-2(c) governing the voluntary withdrawal of the class of securities from listing and registration on the Exchange.

Pursuant to the requirements of the Securities Exchange Act of 1934, GreenHaven Continuous Commodity Index Fund (Name of Issuer or Exchange) certifies that it has reasonable grounds to believe that it meets all of the requirements for filing the Form 25 and has caused this notification to be signed on its behalf by the undersigned duly authorized person.

<u>November 18, 2008</u>	By	<u>/s/ Thomas J. Fernandes</u>	<u>Chief Financial Officer</u>
Date		Name	Title

¹ Form 25 and attached Notice will be considered compliance with the provisions

of 17 CFR 240.
19d-1 as
applicable. See
General
Instructions.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMR control number.