



**State of Rhode Island
Office of the Secretary of State**

Fee: \$100.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Domestic Limited Partnership
Certificate of Limited Partnership**

(Section 7-13.1-201 of the General Laws of Rhode Island, 1956, as amended)

ARTICLE I

The name of the limited partnership is: Fire Claims Solutions Public Adjusters LP

ARTICLE II

The address of the limited partnership's principal office is:

No. and Street: 9 CENTRAL AVE

City or Town: NORTHBRIDGE

State: MA

Zip: 01534

Country: USA

ARTICLE III

The street address (post office boxes are not acceptable) of the initial registered office of the limited partnership is:

No. and Street: 115 SAND DAM RD

City or Town: CHEPACHET

State: RI

Zip: 02814

The name of its initial registered agent at such address is

LOUIS CRITELLI

ARTICLE IV

The name and business address of each general partner is:

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
NONE GIVEN - P	LOUIS RICHARD CRITELLI	115 SAND DAM ROAD CHEPACHET, RI 02814 USA
NONE GIVEN - P	SETH KHOURY	9 CENTRAL AVE NORTHBRIDGE, MA 01534 USA

ARTICLE V

Any other matters the partners determine to include herein:

50/50 PARTNERSHIP

Signed this 31 Day of January, 2025 at 11:04:08 AM by the general partner(s). *This electronic signature of the individual or individuals signing this instrument constitutes the*

affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the partnership, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-13.1

By
Signature(s) of all general partners

SETH KHOURY
LOUIS CRITELLI

Form No. 300
Revised 12/23

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